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## BIB DATA SHEET

CONFIRMATION NO. 6103

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS                             | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.        |                                    |
|---|---|-----------------------------------|---|-------------------------------|------------------------------------|
| 10/808,659  | 03/25/2004  | 386                               | 2621  | 800A-80 CIP IV                |                                    |
| <b>RULE</b>   |   |                                   |   |                               |                                    |
| <b>APPLICANTS</b><br>George C. Schedivy, Aquebogue, NY;   |   |                                   |   |                               |                                    |
| <b>** CONTINUING DATA *****</b><br>This application is a CIP of 10/438,724 05/15/2003 PAT 7,245,274<br>and is a CIP of 10/688,611 10/17/2003<br>which is a CIP of 10/438,724 05/15/2003 PAT 7,245,274<br>This application 10/808,659 03/25/2004<br>is a CIP of 10/699,334 10/31/2003 PAT 6,899,365<br>which is a CIP of 10/438,724 05/15/2003 PAT 7,245,274<br>This application 10/808,659 03/25/2004<br>is a CIP of 10/749,443 12/31/2003 PAT 7,149,078<br>which is a CIP of 10/438,724 05/15/2003 PAT 7,245,274 |   |                                   |   |                               |                                    |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                   |   |                               |                                    |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>06/07/2004  |   |                                   |   |                               |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /ROBERT<br>Acknowledged CHEVALIER/<br>Examiner's Signature   | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>NY | <b>SHEETS<br/>DRAWINGS</b><br>23  | <b>TOTAL<br/>CLAIMS</b><br>37 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>F. CHAU & ASSOCIATES, LLC<br>130 WOODBURY ROAD<br>WOODBURY, NY 11797<br>UNITED STATES   |   |                                   |   |                               |                                    |
| <b>TITLE</b><br>Portable video system   |   |                                   |   |                               |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1076  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                               |                                    |